

Woodcock A and Bradley C (2004) Satisfaction with tablet treatment and meal/snack timing amongst people with sulphonylurea-treated Type 2 diabetes. *Diabetic Medicine* **21** (Suppl 2) 35, Abstract A127.

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Background: Dissatisfaction with tablet regimen or food timing can indicate that an alternative treatment may improve outcomes.

Method: 131 people with sulphonylurea-treated Type 2 diabetes completed the six-item Diabetes Tablet Treatment Questionnaire (DTTQ) and eight-item Diabetes Food Timing Questionnaire (DFTQ). HbA1c was measured.

Results: Mean HbA1c was 7.8% (sd 1.8; range 4.8-4.1%). Most patients had optimal DTTQ item scores for tablet-taking as recommended (77.1%), convenience (86.3%), side-effects (87.8%), perceived low blood sugars (74.0%) and willingness to continue (74.0%), yet only 29.0% scored optimally on perceived high blood sugars. Few scored optimally on DFTQ items concerning eating at recommended times (35.1%), convenience (45.0%), felt had to eat (59.5%), felt shouldn't eat (57.3%), denied self food (19.8%) and felt guilty about eating (40.5%), though 74.0% were not bothered by having to eat at certain times and 71.0% were very satisfied to continue. Psychometric validation revealed a two-item tablet problem scale (alpha 0.72) and a six-item food-timing problem scale (alpha 0.73).

Conclusion: People acknowledge greater dissatisfaction with eating patterns required by conventional sulphonylureas than with the tablets themselves. DTTQ and DFTQ items can be used to guide the need for focussed discussion, educational intervention and/or treatment change and to evaluate their impact.

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